Fill in this information	to identify your case:	
Debtor 1	Dustin Quarrella	
Debtor 2 (Spouse, if filing)		
United States Bankru	ptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
	-30308	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter
Official Form	n 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Francisco estatua	■ Employed	☐ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
employers.	Occupation	Lead Enrollment	
Include part-time, seasonal, or self-employed work.	Employer's name	Cornerstone Education Group	
Occupation may include student or homemaker, if it applies.	Employer's address	306 E 4th St Royal Oak, MI 48067	
	How long employed the	here? August 2019	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 6,250.00 0.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 6,250.00 0.00

Debtor 1 **Dustin Quarrella** 20-30308 Case number (if known) For Debtor 1 For Debtor 2 or

				non-fili	ng spouse
py line 4 here	4.	\$	6,250.00	\$	0.00
t all payroll deductions:					
	5a.	\$	1,280.00	\$	0.00
Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00
Voluntary contributions for retirement plans	5c.	\$	216.00	\$	0.00
Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
Insurance	5e.	\$	440.00	\$	0.00
Domestic support obligations	5f.	\$	801.00	\$	0.00
Union dues	5g.	\$	0.00	\$	0.00
Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00
d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,737.00	\$	0.00
culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,513.00	\$	0.00
receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
Interest and dividends	8b.	\$		\$	0.00
Family support payments that you, a non-filing spouse, or a dependent regularly receive		·			
	8c	\$	0.00	\$	0.00
		· -		· —	0.00
• •		- '		· ·	0.00
Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		·		·	
	_	· —		· -	0.00
	_	· —		· ·	0.00
Other monthly income. Specify: IRS Refunds pro rated 50%	_ 8h.+ _	\$	100.00	+ \$	0.00
d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	100.00	\$	0.00
	Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Ilculate total monthly take-home pay. Subtract line 6 from line 4. It all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	st all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Other deductions. Specify: Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Id the payroll deductions. Add lines 5a+5b+sc+5d+se+sf+sg+sh. Id the payroll deductions. Add lines 5a+5b+sc+5d+se+sf+sg+sh. Id the payroll deductions. Add lines 5a+5b+sc+5d+se+sf+sg+sh. Id the payroll deductions. Add lines 5a+b+sc+sd+se+sf+sg+sh. Id the payroll deductions. Add lines 5a+bb-sc-sg+sg+sg+sg+sg+sh. Id the payroll deductions. Add lines 5a+bb-sc-sg+sf+sg+sh. Id the payroll deductions. Add lines 5a+bb-sc-sg+sf+sg+sh. Id the payroll deductions. Add lines 5a+bb-sc-sg+sg+sg+sg+sg+sg+sg+sg+sg+sg+sg+sg+sg+s	st all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Soc. \$ Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Iculate total monthly take-home pay. Subtract line 6 from line 4. Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	st all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Required repayments of retirement fund loans Insurance Domestic support obligations Other deductions. Specify: Other deductions. Specify: Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Id the payroll deductions. Add lines 5a+5b+fc+fd+5g+5h. Insurance Insurance Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Insurance Interest and insurance and the value form operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Required repayments in page 1, 280,000 Add the payroll deductions. 5a. \$ 0.00 1, 280,000 1, 28	st all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Id the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Idulate total monthly take-home pay. Subtract line 6 from line 4. To a 3,513.00 Insurance Net income regularly received: Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income 4. \$ 0.00 \$ \$ 0

3,613.00 10. \$ 3,613.00 0.00

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J.

10. Calculate monthly income. Add line 7 + line 9.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11.

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

3,613.00 12. Combined

0.00

monthly income

- 13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

\$74,984 Salary / pay increase started 5/26/23 net \$1500 b/w after all deductions

Fill	in this informat	tion to identify yo	our case:					
Deb		Dustin Quari				Check	c if this is:	
							An amended filing	
	tor 2 ouse, if filing)							ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MICHIC	SAN	1	MM / DD / YYYY	
	e number 20 nown)	-30308						
So	chedule		possible	1SES . If two married people and the control of t				
		n). Answer ever			torm. On the top of	any additio	nai pages, write y	our name and case
Pari	t 1: Descr Is this a join	ibe Your House	hold					
1.	No. Go to	line 2.	in a sonar	ate household?				
	□ No	0	·	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.	
2.	Do vou have	e dependents?	□ No	•	·			
	Do not list De Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		4	□ No ■ Yes
					Daughter		5	□ No ■ Yes
								□No
								☐ Yes
								□ No □ Yes
3.	expenses of	enses include f people other t d your depende	han ${\sqsubset}$	No Yes				_,,,,
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your expe	enses
4.		r home owners		uses for your residence. I or lot.	nclude first mortgage	4. \$		1,100.00
	If not includ	ed in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		35.00
				upkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
٥.	, wantional II	igage payiiit	J.113 101 y	σ. ψ		0.00		

Official Form 106J Schedule J: Your Expenses 20-30308-jda Doc 29 Filed 06/22/23 Entered 06/22/23 10:54:18 Page 3 of 6

Deb	tor 1	Dustin 0	Quarrella	Case num	ber (if known)	20-30308
6.	Utilit	ties:				
0.	6a.		, heat, natural gas	6a.	\$	200.00
	6b.	-	wer, garbage collection	6b.		0.00
	6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	0.00
	6d.	•	ecify: Cell Phones	6d.	\$	99.00
			ternet Phone		\$	99.00
7.	Food		ekeeping supplies		\$	750.00
8.			children's education costs	8.	\$	0.00
9.	Clot	hing, laund	Iry, and dry cleaning	9.	\$	100.00
10.		_	products and services	10.	\$	100.00
11.	Medi	ical and de	ental expenses	11.	\$	90.00
12.	Tran	sportation	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	·	350.00
			clubs, recreation, newspapers, magazines, and books	13.	·	64.00
			tributions and religious donations	14.	\$	0.00
15.		rance.				
		ot include ii Life insura	nsurance deducted from your pay or included in lines 4 or 20.	15a.	¢	0.00
		Health ins		15a. 15b.	·	0.00
		Vehicle in		150. 15c.	· —	0.00
			urance. Specify:	15d.	·	130.00
16			nclude taxes deducted from your pay or included in lines 4 or 20.	13u.	Φ	0.00
	Spec	cify:		16.	\$	0.00
17.			ease payments:	170	¢	0.00
			ents for Vehicle 1	17a.	·	0.00
			ents for Vehicle 2	17b.		0.00
		Other. Sp	ecify: 6/22/23 2020 Kia Rio S	17c. 17d.	·	366.00
10			ecry. s of alimony, maintenance, and support that you did not report as		Φ	0.00
10.			your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
19.	Othe	er payment	s you make to support others who do not live with you.		\$	0.00
	Spec			19.	·	
20.	Othe	er real prop	erty expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
	20a.	Mortgage	s on other property	20a.	·	0.00
	20b.	Real esta	te taxes	20b.	\$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
			nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowr	ner's association or condominium dues	20e.	\$	0.00
21.	Othe	er: Specify:		21.	+\$	0.00
22	Calc	ulato vour	monthly expenses			
22.		•	through 21.		\$	3,483.00
			22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,403.00
						2 402 00
	22C.	Add line 22	a and 22b. The result is your monthly expenses.		\$	3,483.00
23.	Calc	ulate your	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,613.00
	23b.	Copy you	r monthly expenses from line 22c above.	23b.	-\$	3,483.00
	23c.		your monthly expenses from your monthly income. t is your monthly net income.	23c.	\$	130.00
24.	For exmodif	xample, do y fication to the lo.	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?	ur mortgage		ease or decrease because of a
	\square Y	es.	Explain here: 6/22/23 newer auto, lower gas and insurance	e costs		

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MICHIGAN

COVER SHEET FOR AMENDMENTS

Case I	Name:	Dustin Quarrel	lla						_ c	ase No.:	: .	20-30308
DESCR	RIBE INFO	RMATION BE	ING AME	NDED E	BY CHE	ECKIN	NG AP	PLICA	BLE BO	OX(ES) E	<u>3El</u>	LOW:
□ Am	nendment	to Petition:										
	□ Name	☐ Debtor(s) M	failing Add	dress 🗌	Alias							
		ture 🗌 Complyi	•			the Fil	iling of	Official	Form(s	s)		
□ Su	_	Your Assets	_		_		_					
_ ☐ Sta	itement o	f Financial Aff	airs									
☐ Scl	hedules a	nd List of Cre	ditors:									
	Schedule	e A/B										
$\overline{\Box}$	Schedule	e C	tor 2 Sche	dule C								
	List of Cı	reditors Sche	edule D	Sched	lule E/F	= and						
		creditor(s), prov 2.00 Fee Requ		ess of cre	editor a	alread	dy on th	ne List c	of Credi	itors, cha	ang	ge amount or classification o
	☐ Char	nge address of	a creditor	already	on the	List c	of Cred	litors - N	No Fee	Require	€d	
	Schedule	e G										
	Schedule	e H										
✓	Schedule	e I										
✓	Schedule	e J										
	Schedule	e J-2										
NO	TE: Use	Page 2 for any	correction	ons or a	dditior	ns to	the Lis	st of Cr	editors	S.		
Additi	onal Deta	ils of Amendn	nent(s):	Amen	nded I 8	& J for	new a	uto and	insura	nce paym	nen	its
→												on this cover sheet may
		a upon by tne ed in the docu			irt as a	com	piete a	ına acc	curate s	summar	y o	of the information
Date	Jointain	ca iii tiic acca	Signatu									
June 2			/s/ John	L. Hicks								
→												ad this cover sheet and
		ched schedule dge, informatio			nts, etc	c., an	a tnat	tney ar	re true	and cor	rec	ct to the best of my
Date	KIIOWIC	ago, imormatic	Signatu									
	2, 2023		/s/ Dustin		lla							

CORRECTIONS TO THE LIST OF CREDITORS

Use this section to make corrections to the name(s) and address(es) of any creditor(s) listed on the current schedules and List of Creditors.

PREVIOUS NAME/ADDRE	SS OF CREDITOR:	PLEASE CHANGE TO: -NONE-
	ADDITIONS TO THE	LIST OF CREDITORS
Use this section to identify NAME OF CREDITOR:	y creditors added to the sched	
ADDRESS:		
-		
NAME OF CREDITOR:		
ADDRESS:		
-		
NAME OF CREDITOR:		
ADDRESS:		
- -		

FOR ADDITIONAL CORRECTIONS/ADDITIONS, COPY THIS SHEET AND CONTINUE.